# BCR-ABL1 Genetic Test

**Applicant Details:**

**Name:** Kory Johnson

**Date of Birth:** January 1, 1980

**Address:** 123 Main Street, Anytown, USA

**Contact Number:** (123) 456-7890

**Email Address:** koryjohnson@gmail.com

**Medical Practitioner/Requesting Physician:**

**Name:** Dr.Jane Swift

**Contact Number:** (987) 654-3210

**Hospital/Clinic:** Cornelia General Hospital

**Sample Information:**

1. **Sample Type:** Blood (e.g., Blood, Bone Marrow)
2. **Date of Collection:** September 25, 2023
3. **Time of Collection:** 10:30 AM

**Test Details:**

1. **Test Type:** BCR-ABL1 Genetic Test
2. **Method:** Quantitative PCR
3. **Purpose:** To monitor response to treatment in Chronic Myeloid Leukemia

**Results:**

1. **BCR-ABL1 Transcript Level (%):** 0.05%
2. **International Scale (%):** 0.10%
3. **Log Reduction:** 3 log
4. **Control Gene (ABL1, BCR, or GUSB) Quantity:** 100,000 copies/µL

**Interpretation:**

☑ **Positive:**

- **Major (e13a2 or e14a2) or Minor (e1a2) Transcript Type:** Major (e13a2)

- **Comments:** The patient shows a significant reduction in BCR-ABL1 transcript level indicating a positive response to the treatment.

☑ **Negative:**

**Recommendations/Follow-up:**

Continue current treatment and retest in 3 months.

**Physician's Signature:** Dr.Jane Swift **Date:** September 26, 2023

**Laboratory Director's Signature:** Dr. Alex Brown **Date:** September 26, 2023

**Disclaimer:** This test is for clinical purposes. Results should be interpreted in conjunction with other clinical findings and laboratory tests. Please consult your healthcare provider for medical advice.

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This template is a basic example and might not include all the details that specific laboratories or healthcare providers might require. The lab that conducts the test would likely have its own detailed form or report format.